## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

(0748322

| (Column 1) (Column 2)   |                                  |   |                 |                                       |            |                  |        | SMALL ENTITY TYPE |   |        | OTHER THAN OR SMALL ENTITY |                        |  |
|---|----------------------------------|---|-----------------|---------------------------------------|------------|------------------|--------|-------------------|---|--------|----------------------------|------------------------|--|
| TOTAL CLAIMS  |                                  |   | /               | 1                                     | 10010      | 11111 21         | l 1    | RATE              | FEE   | 10H    |                            |                        |  |
|   |                                  |   | 6               |                                       | <u>·</u>   |                  |        | <u> </u>          | <del>                                      </del> | 1      | RATE                       | FEE                    |  |
| FOR   |                                  |   | NUMBER FILED NU |                                       |            | ER EXTRA         |        | BASIC FEE         | 385.00  | OR     | BASIC FEE                  | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |                                  |   | 6 minus 20= * 0 |                                       |            |                  |        | X\$ 9=            |   | OR     | X\$18=                     |                        |  |
| INDEPENDENT CLAIMS  |                                  |   | ( minus 3 = 5 0 |                                       |            |                  |        | X43=              |   | OR     | X86=                       |                        |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |                                  |   |                 |                                       |            |                  |        | +145=             |   | OR     | +290=                      |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |                                  |   |                 |                                       |            |                  | 1      | TOTAL             |   | OR     | TOTAL                      |                        |  |
| CLAIMS AS AMENDED - PART II   |                                  |   |                 |                                       |            |                  |        |                   |   |        | OTHER                      | THAN                   |  |
|   |                                  | (Column 1)                                | (Column 2)      |                                       |            | (Column 3)       |        | SMALL             | ENTITY  | OR     | SMALL                      | ENTITY                 |  |
| AMENDMENT A   |                                  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | HIGHES<br>NUMBE<br>PREVIOU<br>PAID FO | ER<br>ISLY | PRESENT<br>EXTRA |        | RATE              | ADDI-<br>TIONAL<br>FEE                            |        | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|   | Total                            | *   | Minus           | **                                    |            | =                |        | X\$ 9=            |   | OR     | X\$18=                     |                        |  |
|   | Independent                      | *   | Minus           | ***                                   |            | = .              |        | X43=              |   | OR     | X86=                       |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                                  |   |                 |                                       |            |                  |        | +145=             |   | OR     | +290=                      |                        |  |
| TOTA<br>ADDIT. FE   |                                  |   |                 |                                       |            |                  |        |                   |   | OD     | TOTAL                      |                        |  |
|   | (Column 1) (Column 2) (Column 3) |   |                 |                                       |            |                  |        |                   |   | JO. 1  | ADDIT. FEE                 |                        |  |
| AMENDMENT B   |                                  | CLAIMS                                    |                 | HIGHES                                | ST         |                  | 1 r    |                   | ADDI-   |        |                            | ADDI-                  |  |
|   |                                  | REMAINING<br>AFTER<br>AMENDMENT           |                 | NUMBE<br>PREVIOU<br>PAID FO           | ISLY       | PRESENT<br>EXTRA |        | RATE              | TIONAL  |        | RATE                       | TIONAL                 |  |
|   | Total                            | *   | Minus           | ** .                                  |            | =                |        | X\$ 9=            |   | OR     | X\$18=                     |                        |  |
|   | Independent                      | *   | Minus           | ***                                   |            | =                |        | X43=              |   | OR     | X86=                       |                        |  |
| Ľ   | FIRST PRESE                      | NTATION OF MU                             | JETIPLE DEP     | ENDENT C                              | LAIM       |                  | 1      | +145=             |   | OR     | +290=                      |                        |  |
|   |                                  |   |                 |                                       |            |                  | L      | TOTAL             |   | L      |                            | •                      |  |
| ADDIT. FEE ADDIT. FEE   |                                  |   |                 |                                       |            |                  |        |                   |   |        |                            |                        |  |
| (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST   |                                  |   |                 |                                       |            |                  |        |                   |   |        |                            |                        |  |
| AMENDMENT C   |                                  | REMAINING<br>AFTER<br>AMENDMENT           |                 | NUMBE<br>PREVIOU<br>PAID FO           | R<br>SLY   | PRESENT<br>EXTRA |        | RATE              | ADDI-<br>TIONAL<br>FEE                            |        | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|   | Total                            | *   | Minus           | **                                    |            | =                |        | X\$ 9=            |   | OR     | X\$18=                     |                        |  |
|   | Independent                      | *   | Minus           | ***                                   |            | =                | -      | X43=              | · ·   |        | X86=                       |                        |  |
|   | FIRST PRESE                      | NTATION OF MU                             | JLTIPLE DEP     | ENDENT C                              | LAIM       |                  | ŀŀ     | A43=              |   | OR     | X00=                       |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |                                  |   |                 |                                       |            |                  |        | +145=             |   | OR     | +290=                      |                        |  |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |                                  |   |                 |                                       |            |                  |        |                   |   |        |                            |                        |  |
|   |                                  | ber Previously Pai                        |                 |                                       |            |                  | r four | nd in the app     | ropriat box                                       | in col | umn 1.                     |                        |  |